WILLIAM M, MAGILL, Clerk Melissa Kucserik, First Assistant Clerk Rebecca Silbernagel, Second Assistant Clerk Jeremy Weiss, Journal Clerk Dierdre Allen Resolution Clerk Chris Ditmeyer,

Clerk Assistant



House of Representatives
State House
Montpelier, VT05633-5501
Tel: (802) 828-2247
e-mail: hclerk@leg.state.vt.us

VERMONT HOUSE OF REPRESENTATIVES

OFFICE OF THE CLERK

House of Representati	ves Disclos	ure Form	
Name: Lynn Botchelos			
I serve on, or am a member of, the following regulated by law or that receive funding from	Boards, Conthe the State:	nmissions, or E	Entities that a
	Remuneration		
Board, Entity, or Commission Name, and Position (e.g. Board Member,) Board Chair)	No	Yes- Only Expenses e.g. mileage	Yes
NEKHS "	1	mneage	
NVDA "	X		
			+
My Employer: Shake of Will Regulary disclosure not required)	epreen	(place)	
Signed this \(\int \) day of \(\sqrt{anasy}, 2	019		
Lynn Batchelas			
Printed Name, please sign on back			